Waitlist Application Form 2024

Child details

Surname		Given name(s)	
Preferred name(s)		Child's CRN number	
Date of birth	D D M M Y Y Y Y	Sex	❏ Male ❏ Female
Child's residential address			
Suburb		Postcode	
Child is	❏ Australian citizen ❏ Permanent resident	❏ Aboriginal or Torres Strait Islander (tick all that apply) ❏ Temporary resident	
Country of birth		Language(s) spoken at home	

Proposed start date		MINIMUM ENROLMENT IS TWO (2) CONSECUTIVE DAYS A WEEK
Please indicate the number of days required		❏ 2 ❏ 3 ❏ 4 ❏ 5
Please specify preferred days (subject to availability)		❏ Mon ❏ Tue ❏ Wed ❏ Thu ❏ Fri
Does your child currently attend anothe service or preschool or have they attended in the past?		❏ Yes ❏ No If yes, details _____
Sibling(s) currently at or previously attended Apples & Honey Preschool		

Parent/Guardian Declaration

I/we hereby request that the above-named child be added to the Apples & Honey Preschool Waitlist. I/we understand completion of the waitlist application does not guarantee an enrolment offer at the service.

Signature of Parent/Guardian 1 (main account holder)		Signature of Parent/Guardian 2	
Date		Date	
Gender		Gender	
Full name		Full name	
Date of birth		Date of birth	
CRN(if claiming CCS)		CRN	
Email		Email	
Contact number		Contact number	

Waitlist Fee

To be placed on the waitlist please deposit a non-refundable $50 waitlist fee to the Apples and Honey Bank Account with your name in the transaction line. **Please screen shot the transaction receipt when sending back the waitlist form**.

Account Name:	Apples and Honey Preschool
BSB:	112 879
Account Number:	498 178 227

Please email completed waitlist form and transaction details to admin@applesandhoney.com.au

For our information …

How did you find out about Apples & Honey Preschool?
❏ Publication/advert ❏ Family/Friends ❏ Our website ❏ Other _____

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